

## Maine CDC, MBCHP Fee for Service Reimbursement Rates

CPT/HCPCS Code	Modifier	Description	2017	2018	2019	2020
<b>Office Visits</b>						
99201		New patient - OV - Problem focused	\$44.06	\$44.60	\$46.09	\$45.91
99202		New patient - OV - Expanded	\$75.01	\$74.98	\$76.82	\$76.04
99203		New patient - OV - Detailed	\$107.98	\$107.37	\$108.63	\$107.61
99204		New patient - OV - Comprehensive Moderate	\$163.95	\$163.54	\$164.87	\$164.11
99205		New patient - OV - Comprehensive High	\$206.25	\$205.47	\$207.14	\$207.30
99211		Established patient - OV - Minimal	\$20.43	\$21.82	\$23.06	\$23.34
99212		Established patient - OV - Problem focused	\$43.83	\$44.00	\$45.48	\$45.55
99213		Established patient - OV - Expanded	\$73.32	\$72.89	\$74.75	\$75.07
99214		Established patient-OV-Detailed	\$107.87	\$107.53	\$109.46	\$108.92
99215		Established patient-OV-Comprehensive	\$145.03	\$144.76	\$146.44	\$146.25
99385		Initial Preventive Med Eval; 18-39	\$107.98	\$107.37	\$108.63	\$107.61
99386		Initial Preventive Med Eval; 40-64	\$107.98	\$107.37	\$108.63	\$107.61
99387		Initial Preventive Med Eval; 65+	\$107.98	\$107.37	\$108.63	\$107.61
99395		Periodic Preventive Med Eval; 18-39	\$73.32	\$72.89	\$74.75	\$75.07
99396		Periodic Preventive Med Eval; 40-64	\$73.32	\$72.89	\$74.75	\$75.07
99397		Periodic Preventive Med Eval; 65+	\$73.32	\$72.89	\$74.75	\$75.07
<b>Breast Cancer Screening and Diagnostic Procedures</b>						
10021		Fine Needle Aspiration (FNA) without imaging guidance	\$122.94	\$122.50	\$98.93	\$99.39
10004		Fine needle aspiration biopsy w/o imaging guidance, ea. add. lesion			\$52.54	\$51.96
10005		Fine needle aspiration biopsy including ultrasound guidance, first lesion			\$128.10	\$130.75
10006		Fine needle aspiration biopsy including ultrasound guidance, ea. add. lesion			\$60.59	\$60.11
10007		Fine needle aspiration biopsy including flouroscopic guidance, first lesion			\$290.83	\$302.17
10008		Fine needle aspiration biopsy including flouroscopic guidance, es. add. lesion			\$163.73	\$171.44
10009		Fine needle aspiration biopsy including CT guidance, first lesion			\$477.26	\$478.40
10010		Fine needle aspiration biopsy including CT guidance, ea. add. lesion			\$287.25	\$287.75
19000		Puncture aspiration breast cyst	\$114.05	\$113.85	\$111.68	\$110.90
19001		Puncture aspiration of breast cysts, each additional cyst	\$27.09	\$26.90	\$27.23	\$27.48
19081		Breast biopsy, w/placement of localization device and imaging of biopsy specimen, percutaneous; <b>stereotactic</b> guidance; first lesion	\$704.30	\$704.05	\$663.28	\$622.28
19082		Breast biopsy, w/placement of localization device and imaging of biopsy specimen, percutaneous; <b>stereotactic</b> guidance; each additional lesion	\$583.02	\$583.73	\$542.86	\$503.16
19083		Breast biopsy, w/placement of localization device and imaging of biopsy specimen, percutaneous; <b>ultrasound</b> guidance; first lesion	\$683.40	\$685.03	\$649.78	\$615.81
19084		Breast biopsy, w/placement of localization device and imaging of biopsy specimen, percutaneous; <b>ultrasound</b> guidance; each additional lesion	\$560.66	\$560.63	\$523.53	\$489.81

19085		Breast biopsy, w/placement of localization device and imaging of biopsy specimen, percutaneous; <b>magnetic resonance</b> guidance; first lesion			\$989.22	\$942.10
19086		Breast biopsy, w/placement of localization device and imaging of biopsy specimen, percutaneous; <b>magnetic resonance</b> guidance; each additional lesion			\$794.92	\$750.47
19100		Breast biopsy, percutaneous, needle core, not using imaging guidance	\$150.71	\$150.77	\$152.81	\$155.10
19101		Breast biopsy, open incisional	\$340.55	\$341.09	\$340.17	\$337.95
19120		Excision of cyst, fibroadenoma, or other benign or malignant tumor, aberrant breast tissue, duct lesion, nipple or areolar lesion; open; one or more lesions	\$490.21	\$490.71	\$500.71	\$506.47
19125		Excision of breast lesion identified by preoperative placement of radiological marker, single; open; lesion	\$542.67	\$542.63	\$553.74	\$558.89
19126		Excision of breast lesion identified by preoperative placement of radiological marker, open; each additional lesion separately identified by a preoperative radiological marker	\$159.71	\$157.95	\$160.60	\$160.13
19281		Placement of breast localization device, percutaneous; <b>mammographic</b> guidance; first lesion	\$243.70	\$243.47	\$247.72	\$249.57
19282		Placement of breast localization device, percutaneous; <b>mammographic</b> guidance; each additional lesion	\$169.56	\$169.77	\$173.58	\$176.56
19283		Placement of breast localization device, percutaneous; <b>stereotactic</b> guidance; first lesion	\$275.13	\$275.37	\$277.48	\$277.05
19284		Placement of breast localization device, percutaneous; <b>stereotactic</b> guidance; each additional lesion	\$207.49	\$208.07	\$211.20	\$211.63
19285		Placement of breast localization device, percutaneous; <b>ultrasound</b> guidance; first lesion	\$527.60	\$530.27	\$497.96	\$466.98
19286		Placement of breast localization device, percutaneous; <b>ultrasound</b> guidance; each additional lesion	\$460.88	\$465.37	\$430.92	\$399.35
19287		Placement of breast localization device, percutaneous; <b>magnetic resonance</b> guidance; first lesion			\$842.15	\$795.82
19288		Placement of breast localization device, percutaneous; <b>magnetic resonance</b> guidance; each additional lesion			\$675.54	\$634.05
76098		Radiological exam, surgical specimen	\$16.69	\$17.00	\$16.77	\$43.31
	TC	Technical (Hospital charge)	\$8.55	\$8.94	\$8.59	\$27.36
	26	Professional (Radiologist charge)	\$8.15	\$8.06	\$8.19	\$15.95
76641		Ultrasound, complete examination of breast including axilla, unilateral	\$109.41	\$109.61	\$108.81	\$108.53
	TC	Technical (Hospital charge)	\$72.52	\$73.11	\$71.74	\$71.84
	26	Professional (Radiologist charge)	\$36.90	\$36.51	\$37.07	\$36.69
76642		Ultrasound, limited examination of breast including axilla, unilateral	\$89.91	\$89.72	\$88.86	\$88.66
	TC	Technical (Hospital charge)	\$55.53	\$55.71	\$54.32	\$54.48
	26	Professional (Radiologist charge)	\$34.38	\$34.02	\$34.55	\$34.17
76942		Ultrasonic guidance for needle placement (e.g., biopsy aspiration or localization device); imaging supervision and interpretation	\$61.13	\$60.49	\$57.77	\$57.92
	TC	Technical (Hospital charge)	\$28.42	\$28.15	\$25.28	\$25.91
	26	Professional (Radiologist charge)	\$32.70	\$32.34	\$32.49	\$32.01
		Magnetic resonance imaging (MRI), breast, w/o contrast, unilateral			\$253.31	\$248.04

77046	TC	Technical (Hospital charge)			\$179.88	\$174.90
	26	Professional (Radiologist charge)			\$73.42	\$73.14
77047		Magnetic resonance imaging (MRI), breast, w/o contrast, bilateral			\$260.04	\$254.51
	TC	Technical (Hospital charge)			\$178.80	\$173.82
	26	Professional (Radiologist charge)			\$81.25	\$80.70
77048		Magnetic resonance imaging (MRI), breast, including CAD, w/and w/o contrast, unilateral			\$402.42	\$393.36
	TC	Technical (Hospital charge)			\$296.26	\$287.60
	26	Professional (Radiologist charge)			\$106.16	\$105.76
77049		Magnetic resonance imaging (MRI), breast, including CAD, w/and w/o contrast, bilateral			\$410.96	\$402.47
	TC	Technical (Hospital charge)			\$294.81	\$286.52
	26	Professional (Radiologist charge)			\$116.15	\$115.95
77053		Mammary ductogram or galactogram, single duct	\$59.52	\$59.10	\$58.34	\$57.40
	TC	Technical (Hospital charge)	\$41.07	\$41.21	\$40.16	\$39.29
	26	Professional (Radiologist charge)	\$18.45	\$17.90	\$18.17	\$18.11
77063		Screening Digital Breast Tomosynthesis, bilateral	\$56.21	\$55.61	\$55.74	\$55.53
	TC	Technical (Hospital charge)	\$25.66	\$25.74	\$25.40	\$25.31
	26	Professional (Radiologist charge)	\$30.55	\$29.87	\$30.33	\$30.22
G0279		Diagnostic Digital Breast Tomosynthesis, unilateral or bilateral	\$56.21	\$55.61	\$55.74	\$55.53
	TC	Technical (Hospital charge)	\$25.66	\$25.74	\$25.40	\$25.31
	26	Professional (Radiologist charge)	\$30.55	\$29.87	\$30.33	\$30.22
77065		Diagnostic Mammography, Unilateral, includes CAD	\$134.93	\$137.33	\$135.89	\$135.75
	TC	Technical (Hospital charge)	\$95.64	\$96.67	\$94.60	\$94.62
	26	Professional (Radiologist charge)	\$39.28	\$40.66	\$41.29	\$41.13
77066		Diagnostic mammography, bilateral, includes CAD	\$171.25	\$173.64	\$172.01	\$171.14
	TC	Technical (Hospital charge)	\$122.39	\$123.50	\$121.09	\$120.66
	26	Professional (Radiologist charge)	\$48.87	\$50.14	\$50.92	\$50.48
77067		Screening mammography, bilateral	\$138.32	\$140.04	\$138.56	\$138.65
	TC	Technical (Hospital charge)	\$101.07	\$102.11	\$100.04	\$100.05
	26	Professional (Radiologist charge)	\$37.25	\$37.93	\$38.52	\$38.61
<b>Cervical Cancer Screening and Diagnostic Procedures</b>						
57420		Colposcopy vagina, w/cervix	\$117.88	\$117.10	\$121.64	\$126.94
57421		Colposcopy w/bx vagina, w/cervix	\$157.20	\$156.27	\$163.10	\$170.88
57452		Colposcopy exam of cervix & vagina	\$109.14	\$108.13	\$115.02	\$121.43
57454		Colposcopy cervix w/bx & ECC	\$152.73	\$150.70	\$157.63	\$165.18
57455		Colposcopy biopsy of cervix	\$142.72	\$141.49	\$148.89	\$156.24
57456		Colposcopy and Endocervical curettage	\$134.69	\$133.53	\$140.09	\$146.88
57460		Endoscopy w/LEEP bx of cx	\$284.13	\$282.05	\$296.25	\$311.37
57461		Endoscopy w/LEEP conization of cx	\$321.15	\$318.44	\$333.00	\$348.68
57500		Bx, single or multiple, local lesion, w/or w/out fulguration <b>[ONLY for endocervical polyps]</b>	\$128.64	\$127.88	\$135.78	\$145.98
57505		Endocervical curettage, not part of D&C	\$102.49	\$102.39	\$113.53	\$130.92

57520		Conization cx, w/or w/out fulguration, w/ or w/out D&C, w/or w/out repair; cold knife or laser	\$307.63	\$306.05	\$324.11	\$338.00
57522		Loop electrode excision procedure (LEEP)	\$263.48	\$261.53	\$276.20	\$290.39
58100		Endometrial sampling (EMB) w/or w/out ECC, without cervical dilatation, any method <b>[ONLY when subsequent to AGC Pap Result]</b>	\$109.26	\$107.86	\$93.68	\$98.61
76830		Ultrasound, transvaginal			\$124.06	\$124.81
	TC	Technical (Hospital charge)			\$88.79	\$89.92
	26	Professional (Radiologist charge)			\$35.27	\$34.90
76831		Saline infusion sono-hysterography (SIS), including color flow Doppler, when performed			\$120.67	\$120.83
	TC	Technical (Hospital charge)			\$83.71	\$84.50
	26	Professional (Radiologist charge)			\$36.95	\$36.33
76856		Ultrasound, pelvic (non-obstetric), real time with image documentation; complete			\$111.36	\$111.07
	TC	Technical (Hospital charge)			\$76.45	\$76.54
	26	Professional (Radiologist charge)			\$34.91	\$34.53
76857		Ultrasound, pelvic (non-obstetric), real time with image documentation; limited or follow-up (eg, for follicles)			\$49.47	\$49.05
	TC	Technical (Hospital charge)			\$24.19	\$24.11
	26	Professional (Radiologist charge)			\$25.28	\$24.94
76941		Echo guide for transfusion			\$69.70	\$67.75
76945		Echo guide villus sampling			\$35.03	\$33.58
76946		Ultrasonic guidance for amniocentesis, imaging supervision and interpretation			\$32.81	\$32.57
	TC	Technical (Hospital charge)			\$13.31	\$13.62
	26	Professional (Radiologist charge)			\$19.50	\$18.95
76948		Ultrasonic guidance for aspiration of ova, imaging supervision and interpretation			\$75.92	\$77.21
	TC	Technical (Hospital charge)			\$40.89	\$43.63
	26	Professional (Radiologist charge)			\$35.03	\$33.58
87624		Human Papillomavirus, high-risk types	\$35.74	\$43.33	\$38.99	\$35.09
87625		Human Papillomavirus, types 16 & 18 only			\$40.55	\$40.55
88141		Cytopathology, c/v, interpret pathologist required	\$32.89	\$32.70	\$32.31	\$26.21
88142		Cytopathology, c/v, thin layer prep (LBC), w/manual screen under pathologist supervision	\$27.79	\$25.01	\$22.51	\$20.26
88143		Cytopathology, c/v, thin layer prep, w/manual screen & rescreen under pathologist supervision	\$27.79	\$25.01	\$23.04	\$23.04
88164		Cytopathology, TBS, c/v, manual screen under pathologist supervision	\$14.49	\$14.65	\$14.99	\$15.12
88165		Cytopathology, c/v, TBS, w/manual screen & rescreen under pathologist supervision	\$14.49	\$42.22	\$42.22	\$42.22
88172		Cytopathology eval FNA	\$58.00	\$58.42	\$57.53	\$56.72
	TC	Technical (Hospital charge)	\$20.11	\$20.90	\$19.84	\$19.40
	26	Professional (Pathologist charge)	\$37.88	\$37.51	\$37.69	\$37.31
		Cytopathology eval FNA, interpretation & report	\$155.87	\$157.19	\$155.82	\$156.70

88173	TC	Technical (Hospital charge)	\$81.79	\$83.50	\$82.14	\$83.29
	26	Professional (Pathologist charge)	\$74.08	\$73.69	\$73.68	\$73.41
88174		Cytopathology, c/v, automated thin layer prep, automated screening under pathologist supervision	\$29.31	\$26.38	\$25.37	\$25.37
88175		Cytopathology, c/v, auto-LBC, auto screen & manual screen/review under pathologist supv	\$36.34	\$32.71	\$29.44	\$26.61
88177		Cytopathology, evaluation of fine needle aspirate, immediate cytohistologic study to determine adequacy of specimen(s), each separate add. Eval. Episode			\$30.26	\$30.15
	TC	Technical (Hospital charge)			\$7.26	\$7.23
	26	Professional (Pathologist charge)			\$23.00	\$22.91
88305		Surgical pathology, gross and microscopic examination (breast/cervical)	\$69.55	\$69.60	\$70.21	\$71.16
	TC	Technical (Hospital charge)	\$29.87	\$30.33	\$30.73	\$32.06
	26	Professional (Pathologist charge)	\$39.67	\$39.27	\$39.49	\$39.10
88307		Surgical pathology, gross and microscopic examination; requiring microscopic evaluation of surgical margins (breast/cervical)	\$270.62	\$269.61	\$274.32	\$280.92
	TC	Technical (Hospital charge)	\$182.98	\$183.19	\$187.75	\$194.90
	26	Professional (Pathologist charge)	\$87.64	\$86.42	\$86.58	\$86.02
<b>Anesthesia</b>						
00400	AA,QK,QY	Anesthesia (#units xcost) 1 unit = 15 mins.	\$21.60	\$21.42	\$21.85	\$21.75
00940	AA,QK,QY	Anesthesia (#units xcost) 1 unit = 15 mins.	\$21.60	\$21.42	\$21.85	\$21.75
01999	AA,QK,QY	Anesthesia (#units xcost) 1 unit = 15 mins.	\$21.60	\$21.42	\$21.85	\$21.75
		Date Reviewed, Rechecked & Updated	7/1/2017	1/11/2018	2/15/2019	4/15/2020
			ENS	ENS	ENS	ENS

**Notes:** RateYear corresponds to Medicare Calendar Year. MBCHP applies rate to Program FY.  
Medicare 2020 rates apply to MBCHP services 7/1/2020-6/30/2021.

CPT/HCPCS marked:   **Must receive prior approval from MBCHP for these services for reimbursement.**